2/1/1	LICATION AS FILED:	TER DETERMINE OF FORM PTO-876	*************			110	oellon or Docke	- Yumber
	(Oolumin 1)	(Oolumn 2)			• • • • • • • • • • • • • • • • • • • •			
EASIO FEE	HUMBER FILED	The second second		SMALL	ENTITY	O R	OTHE	RTHAI
BEAROUSE (I) or (a)		NUMBER EXTR	-	RATE (1)	PEE (1)	7	July Ci	ENTIT
PLOTE LIGHT OF ACCOUNT						1	RATE(I)	FE
67 OFR 1.18(d), (d) or feet								
TOTAL CLAIMS (87 OFR 1.16(1))						1 1	-	
NDEPENDENT OF THE	minue 20 =	4	\neg	x 05:		1 1		
(a) (a) (a)	= B sunkn			x 05=		OR	x 50	
APPLICATION SIZE	If the specification and c	drawings exceed 10	, 	x /00 =			xclod:	· · · ·
MY OFTHE A A SECOND	16 \$250 MAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	MURRIUM SIZA TAA ALL	. 1 1			`	10.00	
	40 U.S.C. ALGOVINGE	MANOR RICHEOF BOO	-11			1		٠
- Francist G	AMM PRESENT OF CODA &	ani.	-11-			-	. 1	
If the difference in column 1	is less than zero, enter or in	7011	7 L	180		· †-	3/1	
APPLICATE	Office and selo, effer of	n column 2.		TOTAL		بنيا `	360	
1-2	ON AS AMENDED - F	'ART II		•		•	TOTAL	
1 0- U+ 10010	mn 1) (Cold	umn 2) (Column 3)	. , .		: · · ·	• .	• • •	
REMA	MNING HIGH	(EST	7	SMALL ENT	TTY	OR	OTHER TH	IAN
	TER PREVIO	DUSTY -EVERA	Ш	RATE (\$)	ADD(:		SMALL EN	TITY
Total : CRICKI	Minus #)	Z =	1	1	TONAL EE (\$)	\\\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	RATE (\$)	ADDI-
findependent GY CHR L16(N)	Minus ***	2	×	0/5/=		R. Vx	50	EE (\$)
Application Size Fee (37	OFR 1.16(s))	2	: X	101	. 1	A	200	·
FIRST PRESENTATION OF A	MULTIPLE DEPENDENT CLAIM	M7 Dirt 4 tons	-	C 27	· · ·	A T	ceoq.	٠, .
	1	61 CALC 1.16(0)	4	80	OF	13	60	
(Column	(4)		ADI	TAL TEE	OF	TOTA	The same	
CLAIN FREMAIN	IS HIGHES	ST .				ADD,	L'FER	
AFTE	NUMBE PREVIOUS	R PRESENT	RA	TE(\$) AD	101-		· · · · · · · · · · · · · · · · · · ·]
GIT OFR I. (GILL)	Minus PAID FO	R	L.	πο	NAL	· RAT		001-
Independent (17. CHR L160VI	Minus +++	-	×	= +64	141	·	TIO	NAL -
Application Size Fee (37 OF			×		OR.	X	=	
FIRST PRESENTATION OF MU	LTIPLE DEPENDENT OLAIM (3				OR OR	X	=	
The second	CHILLE DEPENDENT OLAIM (3	7 OFR 1.16(I)				<u> </u>		
			TOYA		OR OR	L	1 1	
V 11	s than the entry in column 2, ously Paid For IN THIS SPA		ATOTA J'OOA	L .1		TOTAL	The second second	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to the (and by line induding gatheting, preparing, and abmidling the completed application for reduced to the 12 minutes to complete, and the amount of time you require to complete this form and/or suggestions for reducing fills burden, should be sent to the Chief information for reducing the burden, chould be sent to the Chief information of the sent to the Chief information of the complete this form and/or suggestions for reducing fills burden, should be sent to the Chief information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS